Utility Patent Application Transmittal

Inventor: John D. Maynard, et al

Title: Determination of pH Including Hemoglobin Correction

The following are enclosed herewith:

- X Fee Transmittal Form (e.g., PTO/SB/17)
- X Specification; Total Pages __26_2/_
- X Drawing(s) (35 U.S.C. 113): Total Sheets ___9___
- X Return Receipt Postcard (MPEP 503))

17548 U.S. PTO 10/786662

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Albuquerque, NM 87106

Certificate of Mailing

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on the date shown below as Express Mail, number indicated below, in an envelope addressed to: Mail Stop Patent Application; Commissioner for Patents; P. O. Box 1450; Alexandria, VA 22313-1450.

February 25, 2004

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EV 190884781 US

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PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032

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| 🛱 FEE TRANSMITTAL | | | Application Number | | er | | F0. |
| for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision. | | Filing Date | | | | | .s. 66 |
| | | First I | Named | Inven | tor John D. Maynard, e | et al | ⊃% |
| | | Examiner Name | | ame | | | 8/1 |
| Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit | | | | 150 |
| TOTAL AMOUNT OF PAYMENT (\$) 1,018.00 | | Attorney Docket No. | | | o. P0110.US2 | • | <u>・</u> チ |
| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | |
| Check Credit card Money Other None | 3. / | 3. ADDITIONAL FEES | | | | | |
| Order Order | <u>Large</u> | e Entity | Small | Entity | | | |
| Denosit | Fee Cod | | | Fee (\$) | Fee Description | | Fee Paid_ |
| Account Number 502443 | 105 | * | 2051 | • • | Surcharge - late filing fee or oa | ith | |
| Deposit Account InLight Solutions, Inc. | 1052 | 2 50 | 2052 | 25 | Surcharge - late provisional filir | ng fee or | |
| Name | 1053 | 3 130 | 1053 | 130 | cover sheet Non-English specification | | |
| The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments | 1812 | | | | or filing a request for ex parte | reexamination | |
| Charge any additional fee(s) or any underpayment of fee(s) | 1804 | 4 920° | 1804 | 920* | Requesting publication of SIR p | prior to | |
| Charge fee(s) indicated below, except for the filing fee | 1805 | 5 1,840* | 1805 | 1.840* | Examiner action Requesting publication of SIR : | after | |
| to the above-identified deposit account. | 1 | • | | | Examiner action | | |
| FEE CALCULATION | 1251 | | 2251 | | Extension for reply within first a | | |
| 1. BASIC FILING FEE | 1252 | | 2252 | 210 | Extension for reply within seco | | |
| Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid | 1250 1254 | | 2253 | | Extension for reply within third | | |
| Code (\$) Code (\$) | | , | | 740 | Extension for reply within fourt | | |
| 1001 770 2001 385 Utility filing fee 770.00 | 1 | 5 2,010 | 2255 | | Extension for reply within fifth | month | |
| 1002 340 2002 170 Design filing fee | 140 | | 2401 | | Notice of Appeal | | 1 |
| 1003 530 2003 265 Plant filing fee | 1403 | | 2402 2403 | | Filing a brief in support of an a Request for oral hearing | ippeai | |
| 1004 770 2004 385 Reissue filing fee | | 1 1,510 | 1451 | | Petition to institute a public use | o proceeding | |
| 1005 160 2005 80 Provisional filing fee | 1452 | • | 2452 | • | Petition to revive - unavoidable | . • | <u> </u> |
| SUBTOTAL (1) (\$) 770.00 | | 3 1,330 | 2453 | | Petition to revive - unintentiona | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | 1 1,330 | 2501 | | Utility issue fee (or reissue) | ai | |
| Fee from Ext <u>ra Claims below Fee Paid</u> | | | 2502 | | Design issue fee | ÷ | |
| Total Claims 29 -20** = 9 x 18 = 162 | 1503 | 3 640 | 2503 | 320 | Plant issue fee | | |
| Independent Claims 4 - 3** = 1 x 86 = 86 | 1460 | 0 130 | 1460 | 130 | Petitions to the Commissioner | | |
| Multiple Dependent = | 1807 | 7 50 | 1807 | 50 | Processing fee under 37 CFR | 1.17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 1806 | 6 180 | 1806 | 180 | Submission of Information Disc | closure Stmt | |
| Fee Fee Fee <u>Fee Description</u> Code (\$) | 802 | 1 40 | 8021 | 40 | Recording each patent assignr property (times number of prop | ment per | |
| 1202 18 2202 9 Claims in excess of 20 | 1809 | 9 770 | 2809 | | property (times number of prop Filing a submission after final r | | ├── ┤ ┃ |
| 1201 86 2201 43 Independent claims in excess of 3 | ''' | | | | (37 ČFR 1.129(a)) | • | |
| 1203 290 2203 145 Multiple dependent claim, if not paid | 1810 | 770 | 2810 | 385 | For each additional invention to examined (37 CFR 1.129(b)) | o be | |
| 1204 86 2204 43 ** Reissue independent claims over original patent | 180 | 1 770 | 2801 | 385 | Request for Continued Exami | ination (RCE) | |
| 1205 18 2205 9 ** Reissue claims in excess of 20 | 180 | | 1802 | | Request for expedited examin | | |
| and over original patent | | of a design application | | | | | |
| SUBTOTAL (2) (\$) 248.00 | | Other fee (specify) | | | | | |
| **or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) | | | | | | | |
| SUBMITTED BY (Complete (if applicable)) | | | | | | | |
| Name (Print/Type) V. Gerald Grafe | | Registration No. (Attorney/Agent) 42,599 Telephone 505-272-7401 | | | | | |
| Signature V Deusla Do | | | | | Date | FEB 25,20 | 204 |

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.